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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 09/857,797			ing Date 13/2001	☐ To be Mailed	
APPLICATION AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN	
FOR			UMBER FI	.ED NU	NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A			N/A		
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A		N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(a), (p),		N/A		N/A		N/A			N/A		
	FAL CLAIMS CFR 1.16(i))		minus 20 = *			П	x s =		OR	x \$ =		
	EPENDENT CLAIN CFR 1.16(h))	S	minus 3 = *			1	x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE she is \$ add	ets of pap 250 (\$125 tional 50	gs exceed 100 on size fee due for each n thereof. See CFR 1.16(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									1			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL			TOTAL		
										ER THAN ALL ENTITY		
AMENDMENT	08/20/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16())	· 16	Minus	·· 20	= 0		x s =		OR	X \$52=	0	
	Independent (37 CFR 1,16(h))	• 1	Minus	3	= 0]	x \$ =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(s))											
'	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
		(Column 1)		(Column 2)	(Column 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16())	*	Minus	**	=		x \$ =		OR	x \$ =		
Ω	Independent (37 CFR 1.16(h))	*	Minus	***	=]	x \$ =		OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))					l			l	Ь		
Αľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** If	"If the entry in column 1 is less than the entry in column 2, write "o' in column 3. Legal Instrument Examiner: "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (To THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (To THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (To THIS SPACE is less than 3, enter "3". The Highest Number Previously Paid For" (To THIS SPACE is less than 3, enter "3".											

process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.